STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	MHL0601400	A. BUILDING: _____ B. WING _____	06/11/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SMITH COTTAGE	6725 SAINT PETER'S LANE MATTHEWS, NC 28105

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
V 000	INITIAL COMMENTS An annual, complaint and follow up survey was completed on 6/11/24. The complaint was unsubstantiated (intake #NC00216734). Deficiencies were cited. This facility is licensed for the following service category: 10A NCAC 27G .1900 Psychiatric Residential Treatment for Children and Adolescents. This facility is licensed for 9 and has a current census of 7. The survey sample consisted of audits of 3 current clients.	V 000		
V 118	27G .0209 (C) Medication Requirements 10A NCAC 27G .0209 MEDICATION REQUIREMENTS (c) Medication administration: (1) Prescription or non-prescription drugs shall only be administered to a client on the written order of a person authorized by law to prescribe drugs. (2) Medications shall be self-administered by clients only when authorized in writing by the client's physician. (3) Medications, including injections, shall be administered only by licensed persons, or by unlicensed persons trained by a registered nurse, pharmacist or other legally qualified person and privileged to prepare and administer medications. (4) A Medication Administration Record (MAR) of all drugs administered to each client must be kept current. Medications administered shall be recorded immediately after administration. The MAR is to include the following: (A) client's name; (B) name, strength, and quantity of the drug; (C) instructions for administering the drug;	V 118		

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V 118	Continued From page 1 (D) date and time the drug is administered; and (E) name or initials of person administering the drug. (5) Client requests for medication changes or checks shall be recorded and kept with the MAR file followed up by appointment or consultation with a physician. This Rule is not met as evidenced by: Based on record reviews, observations, and interviews, the facility failed to ensure all prescription and non-prescription medications were administered to clients on the written order of a person authorized by law to prescribe drugs affecting 2 of 3 audited clients (#2 and #3) and failed to ensure medications were self-administered by clients only when authorized in writing by the client's physician affecting 1 of 3 audited clients (#2). The findings are: Review on 5/30/24 of client #2's record revealed: -Admission date of 12/12/23. -Diagnoses of Conduct Disorder, Depression, Unspecified Trauma and Stressor Related Disorder, Cannabis Use Disorder, Nicotine Use Disorder. -Physician's Order dated 2/5/24 Clonidine (anxiety) 0.1mg (milligrams) take one tablet by mouth at bedtime. -Physician's Order dated 3/27/24 Mirtazapine (antidepressant) 7.5mg take 1 tablet by mouth at bedtime. -Physician's Order dated 5/15/24 Magnesium (nutritional supplement) 200 mg take 1.5 tablet by	V 118		

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V 118	Continued From page 2	V 118		

mouth nightly.
-Physician's Order dated 1/19/24 Cerave Daily Lotion Moisturizer spread on face every morning for acne.
-Physician's Order dated 1/19/24 Cetaphil Facial Cleanser use to cleanse face twice daily for acne.
-Physician's Order dated 12/8/23 Stri-Dex 2% Pads use one pad to face every day for acne.
-No documentation of authorization to self-administer medications.

Review on 6/3/24 of client #2's MARs dated 3/1/24 through 6/3/24 revealed:
-Clonidine was not administered 3/1/24 to 3/5/24 due to "med (medication) not delivered from pharmacy."
-Mirtazapine was not administered 5/23/24 and 5/26/24 due to "med not delivered from pharmacy."
-Magnesium was not administered 6/2/24 due to "med not delivered from pharmacy."

Observation on 6/3/24 at 12:10pm of client #2's medication storage bin revealed:
-Magnesium, Cerave, Cetaphil, and Stri-Dex were not present.
-The Registered Nurse (RN) went to client #2's room and returned with Cerave, Cetaphil, and Stri-Dex.

Interview on 6/3/24 with client #2 revealed:
-"I missed Magnesium last night (6/2/24) because it didn't come from the pharmacy."
-Denied missing other medications.
-"The nurse (RN) gives us face creams, we take them to the bathroom and use, then we give them back when we are done...No one watches."

Review on 5/30/24 of client #3's record revealed:
-Admission date of 11/2/23.

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V 118	Continued From page 3 -Diagnoses of Oppositional Defiant Disorder; Reaction to Severe Stress, unspecified. -Physician's Order dated 3/7/24 Magnesium 200mg take 1 tablet by mouth at bedtime for anxiety, rest and sleep. Review on 6/3/24 of client #3's MARs dated 3/1/24 through 6/3/24 revealed: -Magnesium was not administered 6/3/24 due to "med not delivered from pharmacy." Observation on 6/3/24 at 12:10pm of client #3's medication storage bin revealed: -Magnesium was not present. Interview on 6/3/24 with client #3 revealed: -Denied missing any medications. Interview on 6/3/24 with the facility's RN revealed: -Client #2 did not receive Clonidine 3/1/24-3/5/24. "It (Clonidine) ran out on a weekend. It was reordered on 3/4/24 and filled on 3/5/24. Whoever (staff) came in on Monday (3/4/24) ordered it and then it would have been here the next morning (3/5/24)." -"When meds run out on the weekends, we reorder on Monday." -Client #2's "Magnesium was reordered on 6/2/24 and should come tonight (6/3/24)." -Gave client #2 "the container (Cerave, Cetaphil, and Stri-Dex) at med pass time. At lunch time, I flag them (client #2) down to bring them (medications) back." -"I don't watch them (client #2) administer (Cerave, Cetaphil, and Stri-Dex)." Interview on 6/11/24 with the Residential Director revealed: -"No kid (client) should be self-administering medications."	V 118		

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V 118	Continued From page 4 -Did not think facial creams had to be monitored since they were sold over the counter.	V 118		
V 120	27G .0209 (E) Medication Requirements 10A NCAC 27G .0209 MEDICATION REQUIREMENTS (e) Medication Storage: (1) All medication shall be stored: (A) in a securely locked cabinet in a clean, well-lighted, ventilated room between 59 degrees and 86 degrees Fahrenheit; (B) in a refrigerator, if required, between 36 degrees and 46 degrees Fahrenheit. If the refrigerator is used for food items, medications shall be kept in a separate, locked compartment or container; (C) separately for each client; (D) separately for external and internal use; (E) in a secure manner if approved by a physician for a client to self-medicate. (2) Each facility that maintains stocks of controlled substances shall be currently registered under the North Carolina Controlled Substances Act, G.S. 90, Article 5, including any subsequent amendments. This Rule is not met as evidenced by: Based on observation and interviews, the facility failed to ensure all medications were stored in a securely locked cabinet for 1 of 3 audited clients (#2). The findings are: Observation on 6/3/24 at 12:10pm of client #2's medication storage bin revealed:	V 120		

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V 120	Continued From page 5 -Cerave, Cetaphil, and Stri-Dex were not present. -The Registered Nurse (RN) went to client #2's room and returned with Cerave, Cetaphil, and Stri-Dex. Interview on 6/3/24 with Client #2 revealed: -"The nurse (RN) gives us face creams, we take them to the bathroom and use, then we give them back when we are done." Interview on 6/3/24 with the facility's RN revealed: -Gave client #2 "the container (Cerave, Cetaphil, and Stri-Dex) at med (medication) pass time. At lunch time, I flag them (client #2) down to bring them (medications) back."	V 120		
V 131	G.S. 131E-256 (D2) HCPR - Prior Employment Verification G.S. §131E-256 HEALTH CARE PERSONNEL REGISTRY (d2) Before hiring health care personnel into a health care facility or service, every employer at a health care facility shall access the Health Care Personnel Registry and shall note each incident of access in the appropriate business files. This Rule is not met as evidenced by: Based on record review and interview, the facility failed to ensure the Healthcare Personnel Registry (HCPR) was accessed prior to hire for 1 of 3 audited staff (#1). The findings are:	V 131		

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V 131	Continued From page 6 Review on 6/5/24 of staff #1's personnel record revealed: -Hire date of 3/4/19. -No verification from the HCPR to indicate a search had been completed for staff #1. Interview on 6/5/24 with the Quality Improvement Specialist revealed: -"We used to do HCPR checks through the background check agency. Now it is a separate check, but it was being done that way when [staff #1] was hired."	V 131		